



**North Carolina Department of Health and Human Services
Division of Mental Health, Developmental Disabilities and Substance Abuse Services**

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Beverly Eaves Perdue, Governor
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**Sign Language Interpreting in Community Settings
POLICY GUIDANCE
(Revised February 22, 2012)**

Sign language interpreting services shall be used when sign fluent providers are unavailable. When sign language interpreting services are necessary, the NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services makes state funding available to pay for these auxiliary services, contingent upon availability of funds. Further, effective 7/1/08, prior authorization from the Central Office for sign language interpreting services is unnecessary when eight hours (or less) of billable¹ interpreting services per week are needed. To access state funding for sign language interpreting, MH/DD/SA service providers are expected to comply with procedures described below.

Procurement of Sign Language Interpreting Services:

1. The MH/DD/SA provider shall contact a licensed interpreter or an interpreter agency to arrange for sign language interpreting services. The provider may contract with any licensed interpreter. Credentials can be checked with the NC Interpreters and Translators Licensing Board at (919) 779-5709. For additional information related to interpreting, please see the website of the Division of Services to the Deaf and Hard of Hearing at <http://www.ncdhhs.gov/dsdhh/directories.htm>.
2. The DMHDDSAS reimbursement schedule is attached as Schedule I. The reimbursement schedule should be reviewed with the interpreter at the time of booking. The MH/DD/SA provider is responsible for fees in excess of the reimbursement schedule.
3. At the time of booking, the MH/DD/SA provider shall supply the interpreter or interpreter agency with the Unique Client ID. (This identification number is item #21 on the "Person Centered Plan Consumer Admission Form".) The Unique Client ID shall be documented on the invoice. If the consumer does not yet have a Unique Client ID and requires emergency services, the Provider Consumer Record Number shall be documented on the invoice.
4. When more than eight hours per week of billable interpreting services are needed, the provider shall contact Brad Trotter at brad.trotter@dhhs.nc.gov or 866-563-0962 to review interpreting needs.

¹ Interpreters bill a two-hour minimum fee per assignment. Example: if an interpreter is booked for a one-hour therapy session, the billing is for two-hours.



Payment of Interpreting Services:

1. After the interpreting assignment is complete, the interpreter or interpreter agency submits an invoice to NC DMHDDSAS. The invoice must contain essential elements required by the State of North Carolina for payment. The invoice shall be placed in a sealed envelope and marked "CONFIDENTIAL", with the name of the sender and a return address clearly marked on the envelope. The original invoice should be sent via US Mail to:

NC DMHDDSAS
3005 MSC
Raleigh, NC 27699-3005
Attn: Mr. Brad Trotter

A sample invoice that includes the required payment elements is attached. Incomplete invoices shall be returned to the interpreter or interpreter agency for correction and resubmission. A resubmitted invoice shall clearly be identified as a resubmission.

2. After review and approval for payment, the invoice is forwarded to the Division's Budget Office for coding to an appropriate account and then forwarded to the DHHS Controller for direct payment to the interpreter.

This policy for procuring sign language interpreting services applies to any provider who is serving an individual in the community who is registered and enrolled as a MH/DD/SA system consumer.

The provision of sign language interpreting services shall be documented as a needed support on the PCP or treatment plan.

